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CONFIRMATION NO. 9923

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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/176,995 01/19/2000
and claims benefit of 60/183,274 02/17/2000
and claims benefit of 60/259,291 12/29/2000
and claims benefit of 60/259,237 01/02/2001
and claims benefit of 60/259,107 12/29/2000
and claims benefit of 60/259,239 01/02/2001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 03/13/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NY	0	25	12
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

30623
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TITLE

THIAZOLE, IMIDAZOLE AND OXAZOLE COMPOUNDS AND TREATMENTS OF DISORDERS ASSOCIATED
WITH PROTEIN AGING

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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time)

1.18 Fees (Issue)

Other

Credit